the costs of processing requests for disclosure and of providing such information.

Final regulations at 45 CFR part 60 set forth the criteria and procedures for information to be reported to and disclosed by the Data Bank. Section 60.3 of these regulations should be consulted for the definition of terms used in this announcement.

A reassessment of the full operating costs related to processing requests for disclosure of Data Bank information, as required by the DHHS Appropriations Act of 1994 (title II of Pub. L. 103–112, dated October 21, 1993), as well as the comparative costs of the various methods for filing and paying for queries, has resulted in a decision to offer a further discount to users when they both query pay via the telecommunications network as well as pay query fees by credit card, electronic funds transfer or such other electronic transfer options as may be offered in the future. The options to query and pay user fees by these means facilitate the querying process and make it less costly to both users and the Data Bank than all other available options.

Accordingly, the Department is adjusting the user fee to provide a $2.00 discount from the basic $6.00 fee per name per query submitted and paid via the method described above, with receipt by electronic method. This change is effective immediately.

The criteria set forth in § 60.12(b) of the regulations and allowable costs are required by the Appropriations Act of 1994 were used in determining the amount of this new fee. The criteria include such cost factors as: (1) Electronic data processing time, equipment, materials, computer programmers and operators or other employees; and (2) preparation of reports—materials, photocopying, postage, and administrative personnel.

When a request is for information on one or more physician, dentist, or other health care practitioner, the appropriate total fee will be $6.00 (minus a $2.00 discount for submission and payment as described above; or, plus a $4.00 surcharge for queries filed on paper forms) times the number of individuals about whom information is being requested. For examples, see the table below.

The fee charged will be reviewed periodically, and revised as necessary, based upon experience. Any changes in the fee, and the effective date of the change, will be announced in the **Federal Register**.

Query method	Fee per name in query, by method of payment	Examples
Paper	$10.00 (irrespective of payment method)	10 names in query. 10×10=$100.00.
Electronic (Diskette)	$6.00 (irrespective of payment method)	10 names in query. 10×$6=$60.00.
Electronic (Telecom network)	$6.00 (if not paid via credit card or other electronic means or if paper response received).	10 names in query. 10×$6.00=$60.00.
Electronic (Telecom network)	$4.00 (if paid electronically via credit card or other electronic means and response received electronically).	10 names in query. 10×$4=$40.00.

Dated: February 23, 1995.

Ciro V. Symaya,

Administrator.

[FR Doc. 95–4963 Filed 2–28–95; 8:45 am]

BILLING CODE 4160–15–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of Assistant Secretary of Health

DEPARTMENT OF AGRICULTURE

Agricultural Research Service

National Nutrition Monitoring Advisory Council: Notice of Meeting

SUMMARY: The National Nutrition Monitoring Advisory Council will hold its sixth meeting on March 15 from 9 a.m. to 5 p.m. e.s.t., and March 16 from 9 a.m. to 1 p.m. e.s.t., at the Hotel Sofitel, 1914 Connecticut Avenue N.W., Washington, D.C. 20009. The meeting will be open to the public.

FOR FURTHER INFORMATION CONTACT: Linda Meyers, HHS Co-Executive Secretary to the Council, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Health, Office of Disease Prevention and Health Promotion, Room 2132, Switzer Building, 330 C Street S.W., Washington, D.C. 20201, (202) 205–9007; or Debra Reed, USDA Co-Executive Secretary to the Council, U.S. Department of Agriculture, Agricultural Research Service, Building 005, Room 215, BARC West, Beltsville, Maryland 20705, (301) 504–6964.

SUPPLEMENTARY INFORMATION: The responsibilities of the National Nutrition Monitoring Advisory Council are to evaluate the scientific and technical quality of the Ten-Year Comprehensive Plan for the National Nutrition Monitoring and Related Research Program and the effectiveness of the coordinated program and to provide guidance to the Secretaries of USDA and HHS. This Council is also required by Public Law 101–445 to prepare annual reports to the Secretaries of USDA and HHS that include recommendations for strengthening the Program.

The Council is chaired by Shiriki K. Kumanyika, Pennsylvania State College of Medicine, Hershey Pennsylvania. Other members are Cutberto Garza, Cornell University, Ithaca, New York; Sue Greig, Manhattan, Kansas; Suzanne Harris, International Life Sciences Institute, Washington, D.C.; Shirley J. Humphrey, Department of Education, Cheyenne, Wyoming; Sheryl Lee, Arizona Department of Health Services, Phoenix, Arizona; Kailash Mathur, South Carolina State University, Orangeburg, South Carolina; Suzanne P. Murphy, University of California, Berkeley, California; and Lynn Parker, Food Research and Action Center, Washington, D.C.

The Council meeting agenda will include updates on progress on the Ten-Year Comprehensive Plan for the National Nutrition Monitoring and Related Research Program, on data release and future plans for the Program's cornerstone surveys—the HHS National Health and Nutrition Examination Surveys and the USDA Continuing Survey of Food Intakes by Individuals, and on related ongoing nutrition monitoring projects.

The public may file statements with the Council before or after the meeting by addressing them to either of the contact persons listed above. Please call Linda Meyers (202/205–9007) by March 5 if you will require a sign language interpreter.

Done at Washington, D.C. this 22d day of February, 1995.

James A. Harrell,

Acting Director, Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

[FR Doc. 95–4930 Filed 2–28–95; 8:45 am]

BILLING CODE 4150–04–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 95D–0002]

Memorandum on the Use of an FDA Cleared or Approved Sterile Connecting Device in Blood Bank Practice; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a memorandum dated August 5, 1994, to all registered blood establishments. In the August 5, 1994, memorandum, the Center for Biologics Evaluation and Research (CBER) recommends practices and procedures in the use of sterile connecting devices (STCD's). CBER also advises that certain uses of these devices may create a new product or significantly modify a regulated product, such that approval of a license application or an application supplement is required. This memorandum provides information to registered blood establishments on the use of STCD's.

DATES: Written comments may be submitted at any time.

ADDRESSES: Submit written requests for single copies of the memorandum to the Congressional and Consumer Affairs Branch (HFM–12), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852–1448. Send two self-addressed adhesive labels to assist that office in processing your requests. Persons with access to INTERNET may request this document from ''Mem8—05—94@A1.cber.fda.gov''. The document may also be obtained by calling CBER FAX Information System at 301–594–1939 from a FAX machine with a touch tone phone attached or built in. Submit written comments on the memorandum to the Dockets Management Branch (HFA–305), Food and Drug Administration, rm. 1–23, 12420 Parklawn Dr., Rockville, MD 20857. Two copies of any comments are to be submitted, except that individuals may submit one copy. Requests and comments should be identified with the docket number found in brackets in the heading of this document. The memorandum and received comments are available for public examination in the Dockets Management Branch (address above) between 9 a.m. and 4 p.m., Monday through Friday.

FOR FURTHER INFORMATION CONTACT: Betty J. Poindexter, Center for Biologics Evaluation and Research (HFM–335), Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852–1448, 301–496–2577.

SUPPLEMENTARY INFORMATION: FDA is announcing the availability of a memorandum to all registered blood establishments on the use of an FDA cleared or approved STCD. STCD's produce sterile welds between two pieces of compatible tubing. This procedure permits sterile connection of a variety of containers and/or needles. This document describes recommended practices and procedures for the use of these devices.

The memorandum provides guidance on the common uses of STCD's as follows: (1) Adding a new or smaller needle to a blood collection set; (2) preparing components; (3) pooling blood products; (4) preparing an aliquot for pediatric use and divided units; (5) connecting additional saline or anticoagulant lines during an automated plasmapheresis procedure; (6) attaching processing solutions; (7) adding an FDA-cleared leukocyte reduction filter; and (8) removing samples from blood product containers for testing.

The memorandum also presents general guidance as well as specific information and examples concerning specifications for submission of applications and application supplements to FDA addressing the use of a STCD. It also includes an appendix with the currently approved dating periods for blood components and source plasma (21 CFR 610.53) and currently recommended dating periods for automated plateletpheresis products (see Revised Guideline for Collection of Platelets, Pheresis (54 FR 3852, January 26, 1989)).

As with other memoranda, FDA does not intend this document to be all-inclusive and cautions that not all information may be applicable to all situations. The memorandum is intended to provide information and does not set forth new requirements. The procedures cited in the memorandum are recommendations. FDA anticipates that blood establishments may develop alternative procedures and discuss them with FDA. FDA may find those alternative procedures acceptable. FDA recognizes that advances may continue in the use of STCD's and that this document may become outdated as those advances occur. The memorandum does not bind FDA and does not create or confer any rights, privileges, or benefits on or for any private person, but is intended merely for guidance.

Interested persons may, at any time, submit to the Dockets Management Branch (address above) written comments on the memorandum. Two copies of any comments are to be submitted, except that individuals may submit one copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

Received comments will be considered in determining whether further revisions to the memorandum are warranted.

Dated: February 17, 1995.

William B. Schultz,

Deputy Commissioner for Policy.

[FR Doc. 95–5061 Filed 2–28–95; 8:45 am]

BILLING CODE 4160–01–F

[Docket No. 95N–0051]

Solvay Pharmaceuticals, Inc., et al.; Withdrawal of Approval of 11 Abbreviated Antibiotic Applications and 11 Abbreviated New Drug Applications

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is withdrawing approval of 11 abbreviated antibiotic applications (AADA's) and 11 abbreviated new drug applications (ANDA's). The holders of the applications notified the agency in writing that the drug products were no longer marketed and requested that the approval of the applications be withdrawn.

EFFECTIVE DATE: March 31, 1995.

FOR FURTHER INFORMATION CONTACT: Lola E. Batson, Center for Drug Evaluation and Research (HFD–360), Food and Drug Administration, 7500 Standish Pl., Rockville, MD 20855, 301–594–1038.

SUPPLEMENTARY INFORMATION: The holders of the applications listed in the table in this document have informed FDA that these drug products are no longer marketed and have requested that FDA withdraw approval of the applications. The applicants have also, by their request, waived their opportunity for a hearing.